

Research team publishes study on telehealth benefits in tobacco treatment for inpatient populations

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The COVID-19 pandemic has created conditions resulting in many tobacco users increasing their tobacco usage, with the calls to quitlines

decreasing. Barriers towards tobacco treatment exacerbated the issue early in the pandemic, with most in-person services unavailable. The acceleration of efforts toward telehealth services helped bridge some of these barriers and now have the potential to increase access to tobacco cessation services moving forward.

A recent study by University of North Carolina Family Medicine faculty, including lead author Kimberly Shoenbill, MD, Ph.D., Eiman Newcomer, MSW, Celeslie Valcourt-Hall, MSW, Michael Baca-Atlas, MD, Caleb Smith, BS, and Adam Goldstein, MD, MPH, was published in the journal *Nicotine & Tobacco Research*. Entitled "An Analysis of Inpatient Tobacco Use Treatment Transition to Telehealth," the study provides the first analysis of inpatient tobacco use treatment during the transition to [telehealth](#) during the COVID-19 pandemic. Comparing "pre-telehealth" and "telehealth" inpatient data from a large tobacco treatment program (TTP), the study found a significant increase in reach and counseling in the telehealth period with 27% more patients served and 24% more counseling sessions conducted. Workflow improvements with quicker transitions between patients drove many of these increases. Reach to all inpatients identified as "current tobacco users" increased by 33%, with subpopulation analysis showing a similar 35% increase in reach to inpatients belonging to races at higher risk for COVID-19 severe disease.

These findings can inform future reach and engagement of large numbers of patients who use tobacco products, especially patients who may begin tobacco use treatment in an inpatient setting and transition treatment to an outpatient setting. Given this study's finding of equitable access and uptake of telehealth services on [inpatient](#) services, the study's data comparison could provide a glimpse into how equitable access to cessation services might improve tobacco use care across demographics and in outpatient settings.

More information: Kimberly A Shoenbill et al, An Analysis of Inpatient Tobacco Use Treatment Transition to Telehealth, *Nicotine & Tobacco Research* (2021). [DOI: 10.1093/ntr/ntab233](https://doi.org/10.1093/ntr/ntab233)

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